Form 9-331 (May 1962)

TEST WATER SHUT-OFF

## UNITED STATES SIPBMIT IN TRIPLICATE\* Other instructions on reverse side)

PULL OR ALTER CASING

BMIT IN TRIPLICATE ther instructions on research setside)

Form approved.

Budget Bureau No. 42-R1424.

LEASE DESIGNATION AND SERIAL NO.

SUBSEQUENT REPORT OF:

REPAIRING WELL

GEOLOGICAL SURVEY				1-89-IND-56	
SUNDRY NOTICES AND REPORTS ON WELLS  (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  Use "APPLICATION FOR PERMIT." for such proposals.)			6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
on S GAS	OTHER			Navajo Tribe	
	NAME OF OPERATOR  Fastern Petroleum Company ADDRESS OF OPERATOR			8. FARM OR LEASE NAME Navajo	
P.O. Box 226, Farmington, New Mexico 87401  Location of well (Report location clearly and in accordance with any State required.)			9. WELL NO. #219 10. FIELD AND POOL, OR WILDCAT		
At surface	1150 FNL - 1650 FWL	R	ELFIVED	Rattlesnake—  11. SEC., T., B., M., OR B SURVEY OR AREA	Dakota
14. PERMIT NO.	15. ELEVATIONS (Show wh	mether DF, RT, DR, etc.)	4 1973	Sec.12,T29N,	
	į –	381 GL OIL	CON. COM.	12. COUNTY OR PARISH San Juan	New Mexico
16.	Check Appropriate Box To Indi	cate Nature of N	DIST. 3 etice, Report, or C	ther Data	
	NOTICE OF INTENTION TO:	1			

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING
SHOOT OR ACIDIZE

ALANDON\*

IX

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(Note: Report results of multiple completion on Well

Completion or Recompletion Report and Log form.)

17 DESCRIBE PROPOSED OR TO PPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any next to this work.) •

WATER SHUT-OFF

Dakota formation was found to be water tite, Propose to set the following plugs:

Dakota 817-648 w/35 sx Base Surface 50-20 w/7 sx Top Plug 0-10 w/3 sx

Erect a 4'4" marker and clean up location.

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19. I hereby certify that the foregoing is true and correct			
SIGNED Addit Control	TITLE Vice President	DATE	May 1, 1973
(This space for Federal or State office use)		1. 2.1. <u>1.1. 1.1. 1.1.</u>	
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE	